

# NY STATE CLIENT SEMI-ANNUAL REPORT

Marking Instructions: Please type or use blue or black ink pen.  
 Completely fill in one circle.  
 Print legible numbers and block letters, no script.

**COMPLETE ALL SECTIONS**  
 before submitting or form will be returned.

## I Reporting Information

Year: 2013

Fill in circle if amendment ☐

Report Period: ☒ January/June ☐ July/December

Type of Lobbying: ☒ Nonprocurement ☐ Procurement ☐ Both

Client Filing Fee Check Number:

## FOR OFFICE USE ONLY

*Cjm* **HAND DELIVERED**  
 CH Name: Public Transit Assn (NY)  
 IIIA: State, \$39,000 132085  
**RECEIVED JUL 15 2013**  
 CK# 8466 \$50.-

## II Client Information

Name: New York Public Transit Association, Inc. (CL001559)

Permanent Business Address: 136 Everett Road

City: Albany

State: NY

ZIP code: 12205

Business Phone: 518-434-9060

Fax Number: 518-426-7092

Third Party Beneficiary (see instructions):

## III Lobbyist(s) Information & Compensation (Current Period Only)

Any individual or organization that has lobbied on behalf of the client must be reported below, regardless of whether the threshold was exceeded by that individual or organization.

**A** Type of Lobbyist: ☒ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name: Weingarten, Reid & McNally LLC

Phone Number: 518-465-7330

Address: One Commerce Plaza, Suite 1105

City: Albany

State: NY

ZIP code: 12205

Compensation for current period: \$ .00

**B** Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

**C** Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

☐ Continued on attached pages

**D TOTAL COMPENSATION** of ALL lobbyists for current period.....(A+B+C+addendum sheets): \$39,000 .00

## Designated Addendum sheet for sections III and IV

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

### III Lobbyist(s) Information & Compensation (Current Period Only)

Any individual or organization that has lobbied on behalf of the client must be reported below, regardless of whether the threshold was exceeded by that individual or organization.

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

### IV Other Expenses (Current Semi-Annual Period Only)

PAID TO: Weingarten, Reid & McNally LLC

DATE: 06 /30 / 13

☐ Ad ☐ Social Event

PURPOSE:

AMOUNT: \$199 .00

☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Birch Hill Catering

DATE: 01 /10 / 13

☐ Ad ☐ Social Event

PURPOSE: Legislative Reception

AMOUNT: \$750 .00

☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Association Development Group

DATE: 02 /08 / 13

☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day brochure design services

AMOUNT: \$764 .00

☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Camelot Print & Copy Center

DATE: 02 /08 / 13

☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day brochure printing

AMOUNT: \$582 .00

☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Camelot Print & Copy Center

DATE: 02 /08 / 13

☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day brochure printing

AMOUNT: \$420 .00

☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

**Designated Addendum sheet for sections III and IV**

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**III Lobbyist(s) Information & Compensation (Current Period Only)**

Any individual or organization that has lobbied on behalf of the client must be reported below, regardless of whether the threshold was exceeded by that individual or organization.

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

**IV Other Expenses (Current Semi-Annual Period Only)**

PAID TO: Camelot Print + Copy Center DATE 02/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day Materials AMOUNT: \$ 202.00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Association Development Group DATE 02/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day DVD AMOUNT: \$ 80.00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Association Development Group DATE 02/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day Postage AMOUNT: \$ 308.00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Association Development Group DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day design suite AMOUNT: \$ 148.00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Association Development Group DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day Signage AMOUNT: \$ 100.00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

## Designated Addendum sheet for sections III and IV

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### III Lobbyist(s) Information & Compensation (Current Period Only)

Any individual or organization that has lobbied on behalf of the client must be reported below, regardless of whether the threshold was exceeded by that individual or organization.

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

### IV Other Expenses (Current Semi-Annual Period Only)

PAID TO: Association Development Group DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day design sue AMOUNT: \$ 231 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Association Development Group DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day Banners (LGE) AMOUNT: \$ 1,854 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Association Development Group DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day video AMOUNT: \$ 471 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Association Development Group DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Press Transit Awareness Day Press Release Distribution AMOUNT: \$ 125 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Association Development Group DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day Photographs AMOUNT: \$ 500 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

### Designated Addendum sheet for sections III and IV

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#### III Lobbyist(s) Information & Compensation (Current Period Only)

Any individual or organization that has lobbied on behalf of the client must be reported below, regardless of whether the threshold was exceeded by that individual or organization.

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Compensation for current period: \$ \_\_\_\_\_ .00

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Compensation for current period: \$ \_\_\_\_\_ .00

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP code: \_\_\_\_\_

Compensation for current period: \$ \_\_\_\_\_ .00

#### IV Other Expenses (Current Semi-Annual Period Only)

PAID TO: Camelot Print + Copy Center DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day materials AMOUNT: \$ 127 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Camelot Print + Copy Center DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day materials AMOUNT: \$ 813 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT Printed Packets

PAID TO: Camelot Print + Copy Center DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day key Invites AMOUNT: \$ 62 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: WB Mason DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day Supplies AMOUNT: \$ 127 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: EP + M International DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Transit Awareness Day display AMOUNT: \$ 565 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT booth rental

**Designated Addendum sheet for sections III and IV**

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**III Lobbyist(s) Information & Compensation (Current Period Only)**

Any individual or organization that has lobbied on behalf of the client must be reported below, regardless of whether the threshold was exceeded by that individual or organization.

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

**IV Other Expenses (Current Semi-Annual Period Only)**

PAID TO: ZAP Courier Svc DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Trans. + Awareness Day memo AMOUNT: \$ 300 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT delivery

PAID TO: Cranial Solutions DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Trans. + Awareness Day T-shirts AMOUNT: \$ 1500 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Association Development Group DATE 03/21/13 ☐ Ad ☐ Social Event

PURPOSE: Trans. + Awareness Day Slide show AMOUNT: \$ 221 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT Design

PAID TO: Birch Hill Catering DATE 03/04/13 ☐ Ad ☐ Social Event

PURPOSE: Trans. + Awareness Day Reception AMOUNT: \$ 4,749 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: Association Development Group DATE 04/05/13 ☐ Ad ☐ Social Event

PURPOSE: Trans. + Awareness Day Signage AMOUNT: \$ 166 .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT design

**Designated Addendum sheet for sections III and IV**

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**III Lobbyist(s) Information & Compensation (Current Period Only)**

Any individual or organization that has lobbied on behalf of the client must be reported below, regardless of whether the threshold was exceeded by that individual or organization.

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

Type of Lobbyist: ☐ Retained ☐ Employed ☐ Designated

Level of Gov't: ☐ State Lobbying ☐ Local Lobbying ☐ Both

Name:

Phone Number:

Address:

City:

State:

ZIP code:

Compensation for current period: \$ .00

**IV Other Expenses (Current Semi-Annual Period Only)**

PAID TO: *Accu Print* DATE: *04 105 1/3* ☐ Ad ☐ Social Event

PURPOSE: *Trans. + Awareness Day Signage* AMOUNT: \$ *293* .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: *Read Media* DATE: *04 105 1/3* ☐ Ad ☐ Social Event

PURPOSE: *Trans. + Awareness Day Press Release* AMOUNT: \$ *195* .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

PAID TO: *ZAP Courier Svc* DATE: *04 105 1/3* ☐ Ad ☐ Social Event

PURPOSE: *Trans. + Awareness Day collateral* AMOUNT: \$ *215* .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT *delivery*

PAID TO: *Association Development Group* DATE: *05 113 1/3* ☐ Ad ☐ Social Event

PURPOSE: *Trans. + Awareness Day Reception* AMOUNT: \$ *917* .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT *Expenses*

PAID TO: DATE: */ /* ☐ Ad ☐ Social Event

PURPOSE: AMOUNT: \$ .00 ☐ \*Addendum attached

☐ PROCUREMENT ☐ NONPROCUREMENT

**IV Other Expenses (Current Semi-Annual Period Only)**

<b>A</b> Report in the aggregate all expenses less than or equal to \$75:		\$ 0	.00
<b>B</b> Report in the aggregate all expenses for salaries of non-lobbying employees:		\$ 0	.00
<b>C Itemize each expense exceeding \$75:</b>			
PAID TO: Weingarten, Reid & McNally LLC	DATE: 02 / 29 / 13	<input type="radio"/> Ad	<input type="radio"/> Social Event
PURPOSE:	AMOUNT: \$ 201.00	<input type="radio"/> *Addendum attached	
<input type="radio"/> PROCUREMENT <input type="radio"/> NONPROCUREMENT			
PAID TO: Weingarten, Reid & McNally LLC	DATE: 04 / 30 / 13	<input type="radio"/> Ad	<input type="radio"/> Social Event
PURPOSE:	AMOUNT: \$ 196.00	<input type="radio"/> *Addendum attached	
<input type="radio"/> PROCUREMENT <input type="radio"/> NONPROCUREMENT			
<input checked="" type="checkbox"/> Continued on attached pages			
* If any expense listed above exceeds \$75 for an individual, you must attach the addendum page listing the expense, dollar amount attributable to the individual and the name, title and employer of the individual.			
<b>D Total expenses for current period:</b>		\$17,381	.00 (if applicable, include all expenses from attached pages in total)

**V Source of Funding Disclosure**

**Instructions:** In the event only one person or entity is listed as the Single Source for a Contribution(s), use Section A. In the event multiple persons or entities have been aggregated as a Single Source for a Contribution(s), use Section B.

**A** Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received. If more than five Contributions from the Single Source have been received, use section V(C) of the Addendum for the additional Contributions.

**Contribution(s) from Single Source #1**

Single Source Entity's Name: Capital District Transportation Authority  
or  
Single Source Person's Last Name: First Name:  
Address: 110 Watervliet Avenue  
City: Albany State: NY ZIP code: 12206  
Phone: 518-482-3371

Date Contribution Received: 01 / 04 / 13	Amount of Contribution: \$ 1,750	.00
Date Contribution Received: / /	Amount of Contribution: \$	.00
Date Contribution Received: / /	Amount of Contribution: \$	.00
Date Contribution Received: / /	Amount of Contribution: \$	.00
Date Contribution Received: / /	Amount of Contribution: \$	.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐**Contribution(s) Single Source #2**

Single Source Entity's Name: Central New York Transportation Authority  
or  
Single Source Person's Last Name: First Name:  
Address: 200 Cortland Avenue, PO Box 820  
City: Syracuse State: NY ZIP code: 13205  
Phone: 315-442-3300

Date Contribution Received: 03 / 13 / 13	Amount of Contribution: \$ 1,450	.00
Date Contribution Received: / /	Amount of Contribution: \$	.00
Date Contribution Received: / /	Amount of Contribution: \$	.00
Date Contribution Received: / /	Amount of Contribution: \$	.00
Date Contribution Received: / /	Amount of Contribution: \$	.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐Check here if there are Contribution(s) from Single Source(s) other than those listed above. Use Section V(A) of the Addendum to list all such Contributions: ☒

## Designated Addendum sheet for section V(A)

Please use the following addendum pages as continuation for the specified sections. If additional space is needed, please make a copy of this sheet.

### V Source of Funding Disclosure

**A** Below, list all Contributions received from the Single Source. Include the date and the amount of the Contribution received.

#### Contributions from Single Source #3

Single Source Entity's Name: Metropolitan Transportation Authority

or  
Single Source Person's Last Name:

First Name:

Address: 247 Madison Avenue

City: New York

State: NY

ZIP code: 10017

Phone: 212-878-7313

Date Contribution Received:	02	/25	/13	Amount of Contribution:	\$9,000	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$	.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

#### Contributions from Single Source # 4

Single Source Entity's Name: Niagara Frontier Transportation Authority

or  
Single Source Person's Last Name:

First Name:

Address: 181 Ellicott Street

City: Buffalo

State: NY

ZIP code: 14203

Phone: 716-855-7300

Date Contribution Received:	01	/08	/13	Amount of Contribution:	\$ 2,310	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$	.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

#### Contributions from Single Source # 5

Single Source Entity's Name: Westchester County Department of Transportation -The Bee Line System

or  
Single Source Person's Last Name:

First Name:

Address: 100 East First Street

City: Mount Vernon

State: NY

ZIP code: 10550

Phone: 914-813-7756

Date Contribution Received:	04	/15	/13	Amount of Contribution:	\$2,310	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$	.00
Date Contribution Received:	/	/		Amount of Contribution:	\$	.00

Check here if using section V(C) of the Addendum for additional Contributions: ☐

**VI** Subjects lobbied:
☐ Continued on attached pages
**VII** Person, State Agency, Municipality or Legislative Body lobbied:
☐ Continued on attached pages
**VII** Bill, Rule, Regulation, Rate Number or brief description relative to the introduction or intended introduction of legislation or a resolution on which you lobbied:

A3000 A3004 A3008

S2600 S2604 S2608 S4509

☐ Continued on attached pages
**VIII** Title and Identifying Numbers of procurement contracts/documents lobbied:
☐ Continued on attached pages
**IX** Number or Subject Matter of Executive Order of Governor/Municipality lobbied:
☐ Continued on attached pages
**X** Subject Matter of and Tribes involved in tribal-state compacts, etc lobbied:
☐ Continued on attached pages
**XI Declaration**

This Declaration must be signed by the Chief Administrative Officer. (If the Chief Administrative Officer, for any reason, does not sign, he/she must duly designate another person to sign this Declaration.) (See instructions.)

I declare under penalty of perjury that the information contained in this report is true, correct, and complete to the best of my knowledge and belief.

**X** SIGNATURE:

DATE:

PRINT NAME: LAST

FIRST

TITLE:

Mark One:

☒

Chief Administrative Officer

☐

Designee(Attach Letter)

**The following MUST be attached to this report at the time of submission:**

- You must attach a \$50 dollar filing fee to each semi-annual report. (No fee is required for amendments to the original)
- If applicable, a designation letter if you have marked designee in section XI.
- If applicable, continuation sheets for sections III, IV, V, VI, VII, VIII, IX and X.

**PLEASE NOTE** You may be assessed up to \$25 for each day this report is late.